

ISSUE SLIP STAPLE AREA (for additional cross references)

PERSON	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	07-12-99
FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ Rejected  
 □ Allowed  
 (Through numeral) Canceled  
 - Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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